

CERTIFICATE OF TRANSMITTAL

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING FACSIMILE
TRANSMITTED TO THE UNITED STATES PATENT AND TRADEMARK OFFICE
AT (703) 308-4242 ON AUGUST 14, 2002

Virginia Dress
AGENT/ATTORNEY FOR APPLICANT

August 14, 2002

DATE

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PIONEER HI-BRED INTERNATIONAL, INC.
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7100 N.W. 62nd Avenue
P.O. Box 1000
Johnston, Iowa 50131-1000

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TO: Assistant Commissioner For Patents
FROM: Virginia Dress, Registration No. 48,243
RE: U. S. Patent Application No. 09/538,396; Attorney Docket No. 1116
Applicant: Pramod B. Mahajan
Title: Rad50 Orthologue and Uses Thereof
DATE: August 14, 2002 FAX NUMBER: (703) 308-4242
NUMBER OF PAGE(S) FOLLOWING THIS SHEET: 11

COMMENTS:

Attached please find:

- Transmittal – Amendment/2 pages
- Amendment After Final Action including Version With Markings to Show Changes Made/9 pages

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Theena Doss
AGENT/ATTORNEY FOR APPLICANT

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DATE

Attorney Docket No. 1116

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Pramod B. Mahajan Date: August 14, 2002

Serial No.: 09/538,396 Group Art Unit: 1638

Filed March 29, 2000 Examiner: M. Ibrahim

For: Maize Rad50 Orthologue and Uses Thereof

Assistant Commissioner for Patents
Washington, D.C. 20231

TRANSMITTAL – AMENDMENT

Transmitted herewith is an amendment in the above-identified application.

Fee Calculation for Amended Claims

The fee is calculated as shown below:

	Col 1		Col 2	Col 3	Other than a small entity	
	Claims Remaining After Amendment		Highest Number Previously Paid For	Present Extra	Rate	Additional Fee
Total	11	Minus	11	= 0	x 18 =	\$0.00
Indep	3	Minus	6	= 0	x 84 =	0.00
<input type="checkbox"/> First presentation of Multiple Dependent Claim					+ 280 =	
					Total	\$0.00

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

Serial No. 09/538,396
Group Art Unit: 1638

- No additional fee is required for the amendment(s).
- Charge \$_____ for this amendment to Deposit Account No. 16-1852.
Two copies of this form are enclosed.

Please charge any additional fees under 37 CFR 1.16 or 1.17 which may be required by this paper, or credit any overpayment, to Deposit Account No. 16-1852.

Respectfully submitted,



Virginia Dress
Agent for Applicant(s)
Registration No. 48,243

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